

# NHB/NMRTC Bremerton *Caduceus*

*A Monthly Recap of info, insight & issues for Sept. 2020*



## Remembering 9/11 - the Fateful Day 19 years ago

*By Douglas H Stutz, NHB/NMRTC Bremerton public affairs officer* -- When the opportunity came up to put together a commemoration for 9/11, Hospital Corpsman 2nd Class Morgan Chaney immediately knew it was a good idea.

“Due to COVID-19, we really didn’t have any plans. It felt weird not to do something,” said Chaney, a Boise, Idaho native, who worked on putting together a video dedicated to those lost and those who had their lives changed due to that fateful day of 9/11.

Along with Chaney’s effort, throughout the morning of Sept. 11, 2020, Naval Hospital Bremerton (NHB) staff members paid tribute in a variety of ways.

After morning colors under a smoke-filled, orange-tinged sky due to the ongoing wildfire season, timely pronouncements shared exactly at 8:15 a.m., 8:45 a.m., 9:03 a.m., 9:45 a.m. and 10:10 a.m. were disseminated command-wide in remembrance of the terrorist attack that took place 19 years ago.

“Today marks the 19th anniversary of the attacks of 9/11. [That day] 19 militants associated with the Islamic extremist group Al Qaeda hijacked four airplanes and carried out suicide attacks against targets in the United States. Two of the planes were flown into the twin towers of the World Trade Center in New York City, a third plane hit the Pentagon just outside Washington D.C., and the fourth plane crashed in a field near Shanksville, Pa. Almost 3,000 people were killed. This is to remember those who we have lost and those who paid the ultimate sacrifice.



*Senior Chief Hospital Corpsman Romualdo ‘Jay’ Humarang leads staff assigned to Morning Colors Sept. 11, 2020, which included remembrance to all those lost 19 years ago on that fateful 9/11 day in 2001 (Official Navy photo by Douglas H Stutz, NHB/NMRTC Bremerton public affairs officer).*

We will never forget,” said NHB Command Master Chief Robert Stockton.

There were also multiple historical static displays on the quarterdeck to remember the events of that day arranged by various command associations such as the Nurses Association, First Class Petty Officers Association, Second Class Petty Officer Association, Junior Enlisted Association, Coalition of Sailors Against Destructive Decisions/Recreation Activities Committee and Sailors Against Sexual Harassment and Assault.

Senior Chief Culinary Specialist Kevin Flatley was a second class petty officer assigned to the ballistic-missile submarine USS Alabama (SSBN 731) back on Sept. 11, 2001, just cleaning up after that morning’s breakfast. His boat had just returned to port from patrol the night before.

The Long Island, New York, native shared his memories of that time to Chaney for his



*For Whom The Bell tolls...the somber tone of NHB/NMRTC Bremerton quarterdeck bell rang out in remembrance of those lost in the terrorists attacks on Sept. 11, 2001 (Official Navy photo by Douglas H Stutz, NHB/NMRTC Bremerton public affairs officer).*

dedication video.

“We started to get the initial reports that something had gone wrong in New York. The reports kept coming in – two planes, both buildings on fire,” recollected Flatley. “I remember very distinctly someone coming in around 9:30 a.m. and said one of the buildings had collapsed. I didn’t believe them. Looked at them and said that couldn’t possibly have happened. Then we started to receive emergency action messages which is something common at sea but not in port. That was when I started to realize this was very serious. Captain showed up and announced to make preparations to get underway. We did the fastest startup ever and we were gone an hour later.”

Hospital Corpsman 1st Class Jesus Albarran



**Naval Hospital  
Bremerton Caduceus is an official  
Navy internal publication**

Capt. Shannon J. Johnson, MSC, Commanding Officer

Capt. Jeffrey Feinberg, MC (FS), Executive Officer

CMDCM (AW/SW), Robert Stockton, Command Master Chief

gave the command wide announcement, “At 8:45 a.m., on a clear Tuesday morning, an American Airline Boeing 767, Flight 11, loaded with 20,000 gallons of jet fuel crashed near the 80th floor of the north tower of the World Trade Center in New York City.”

Eighteen minutes later, Hospital Corpsman 2nd Class Sean McKenna provided another command-wide announcement, “At 9:03 a.m., the second Boeing 767, United Airlines Flight 175 appeared out of the sky, turned sharply toward the World Trade Center and sliced into the south tower near the 60th floor. The collision caused a massive explosion that showered burning debris over surrounding buildings and onto the streets below. It became clear that America was under attack.”

Flatley attests there was bewilderment trying to determine just what was taking place not just that morning but for several days afterwards.

“What followed was a confusing three days,” noted Flatley. “Very little info, didn’t understand the full scope of things, wasn’t sure if we were going to come home, launch our payload, but was proud of our crew. Thinking back, getting our entire crew back and underway in a few hours, no one ran home scared, this was until then a peacetime Navy. But everything changed that day.”

Hospital Corpsman 3rd Class Megan Schnell announced to the command, “at 9:45 a.m., as millions watched the events unfolding in New York, American Airlines Flight 77 circled over downtown Washington D.C., before crashing into the west side of the Pentagon.”

Capt. Shannon J. Johnson, NHB/NMRTC Bremerton commanding officer, followed precisely at 10:10 a.m. and shared to her command, “On September 11, 2001, United Flight 93, California-bound, was hijacked after leaving Newark Liberty International Airport, New Jersey. The passengers fought

the four hijackers and the plane flipped over and sped towards the ground crashing near Shanksville, Pa.”

“Together, let’s recommit to remembering and honoring the lives that might have been and keep faith with the innocent who perished on September 11,” continued Johnson. “Though evil visited us on a cloudless Tuesday morning, courage and strength answered amid the fire and smoke in New York City, over a Pennsylvania meadow and across our Pentagon. We remember the bravery and sacrifice of those who fell here in America, and then on far-flung battlefields. We salute the soldiers, sailors, airmen, Marines, and Coast Guardsmen who have served and sacrificed in the global war on terror that ensued, and we honor those who have given their last full measure of devotion, declaring proudly that Americans do not scare. We remember all that is good, all that is virtuous, and all that is noble about those we have lost. Let us never forget and always be ready.

Chaney was in the seventh grade in 2001, sitting in a history class at the time of the attacks. His memory of that time also recalls listening to a radio show several days afterwards featuring a children segment on how there were those who lost a parent or parents during the attacks.

“That was so impactful. It left a lasting impression on me,” Chaney said.

The lingering follow-up of 9/11 also influ-

**NHB/NMRTC Bremerton Internet Site:**  
<https://www.med.navy.mil/sites/nhbrem/Pages/Default.aspx>

**NHB/NMRTC Bremerton Official Facebook site:**  
<https://www.facebook.com/navalhospitalbremerton>

**NHB on Defense Video Info Distro Service:**  
<https://www.dvidshub.net/tags/news/nmrhc-bremerton>

**NHB Command Ombudsman:**  
[nhb.ombudsman@gmail.com](mailto:nhb.ombudsman@gmail.com).

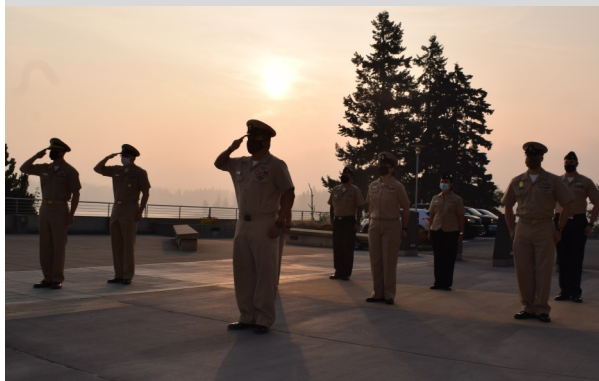
enced Chaney after he joined the Navy. His initial duty station was in Afghanistan directly supporting Operation Enduring Freedom. He found himself as a young hospital corpsman in the volatile eastern part of the war-torn land.

“I was at patrol bases and stood up forward operating bases in the area where I was,” Chaney said.

A far cry from his home town of Boise, his memories of 9/11 from the 7th grade, yet not from those lost on that fateful day, nor the lives changed of an entire nation from that moment on.



*For Whom The Bell tolls...the somber tone of NHB/NMRTC Bremerton quarterdeck bell rang out in remembrance of those lost in the terrorists attacks on Sept. 11, 2001 (Official Navy photo by Douglas H Stutz, NHB/NMRTC Bremerton public affairs officer).*





# More than a statistic – Suicide takes a Toll



*Negotiating the bend of the road - as in life - even at Bagram Air Base, Afghanistan, circa 2002, required soldiers, sailors, airmen, and Marines to lend a hand to those in need, professionally and at times personally (Official Navy photo by Douglas H Stutz, CAOC, PSAB, KSA).*

*By Douglas H Stutz, Naval Hospital Bremerton Public Affairs Officer -- Seven years ago, the suicide of actor and comedian Robin Williams brought such a devastating act to the forefront of our emotions.*

Over half-dozen year later, as Navy Medicine—and the rest of DoD—recognized September as Suicide Prevention Month, we still reflect on the loss of Williams that year.

Along with too many of us, at too many commands, remembering someone lost this year, as well as lamenting the hundreds of other America's soldiers, Sailors, airmen, and Marines gone in the same solemn span of time.

When Williams was pronounced dead by suicide, the loss of such an enormous talent and ardent supporter of our military was felt by many who thought they had just lost a shipmate, because in a way they had.

When many of us found out that someone we actually knew – not some abstract statistic or some unknown individual - took their own life, we were simultaneously stunned, shocked, and saddened, because we just lost that shipmate.

Back in 2002-2003, when working out of Prince Sultan Air Base, Kingdom of Saudi Arabia



and traveling to several locales down range - unbeknownst to me at that time - Williams had already been boots on the ground and was coming back again.

I missed out getting to see him. Those who did attest his infectious humor gave them a jolt of remembering what it was like to be able to laugh and smile, sentiments not easy to come by at that time north of the Hindu Kush. It was an unforgiving land wracked by decades of war.

The Army, Air Force, Navy, and Marine personnel who had the opportunity to see Williams in November 2002 were a hardened fighting force undertaking deployments a long way from more than just home. They were working out of such places as Bagram Air Base, Afghanistan; Karsi-Khanabad, Uzbekistan, and Ganci Air Base, Kyrgyzstan.

Williams' gift of comedy was an offering of selfless sharing and manic inclusiveness. His performances talked directly to those in uniform, almost as if he was encompassing and articulating all the random and ribald thoughts the troops had. It was as if he was one of those in uniform, and they in turn were part of him.

Classic Williams: "We're here at the third hole of the Afghan Open," he shared in a television golf announcer's muted tone to his military audience. "We can't play the tenth hole, because it's still mined."

I didn't know Williams as much as I knew of him. I knew he gave willingly of his comedy gift to help others cope when stationed so far away from home.

I did know, as did many others at NHB, one of our own who is now tragically gone. He also gave willingly. He shared his compassion and care as a member of our command and as a United States Navy Sailor.

He was one of those individuals who went out of his way to help others in their time of need. When asked why he did such a thing, he replied, "it's in my heart and soul."

Four years later, his heart and soul are gone.

Along with the residual shock and associated sadness is a sense of profound frustration. How could he take his own life?

What about those others we've lost this year alone?

The Navy alone has had 53 active-duty and seven reserve Sailors take their life to date this year. Don't need an calculator to tally that alarming total of finality.

If it's above zero it's too many.

What can we do, or not do? What can we say, or not say, if we sense someone is seriously bummed?

"Those of us involved in the healthcare mission, and as members of a cohesive Navy team, are engaged in suicide awareness and prevention efforts all year long. For us, suicide prevention must continue to be a year-round effort," shared Capt. Shannon J. Johnson, NHB commanding officer, asking each staff member – active duty, civil service, contractor, volunteer – to continue

to be mindful of how co-workers and all team-members are doing, both personally and professionally.

“Please focus on practicing compassion with your colleagues and teammates, and just as importantly, please be compassionate with yourself. We all have our challenges and difficult days, but our challenges and difficulties do not define us. Your strength is greater than your obstacles. Help is always available, and there is always a way for things to get better. None of us has to do this alone. Reaching out and asking for help is a sign of strength,” Johnson said, adding that if anyone believes another might be in trouble, ACT (Ask Care Treat)!

**A-ASK if someone is thinking about suicide.**

**C-Let them know you CARE.**

**T- Get him or her to TREATMENT as soon as possible.**

“Assure them that seeking treatment is a sign of strength,” stressed Johnson.

The Navy’s Suicide Awareness website notes that one in five people will experience at least one episode of major depression in their lifetime.

From a well-known figure like Robin Williams six years ago, to a well-regarded shipmate, and the 53 active-duty and seven reserve Sailors that have been lost forever already this year, experiencing such an episode very possibly contributed to ending their life.

It’s up to all of us to help make a difference. Don’t wait or hesitant to do just that.

**Suicide Prevention resource sites:**

**National Suicide Prevention Lifeline: 1-800-273-TALK**



*Along with the ongoing pandemic outbreak, there was yet more potential peril for NHB/NMRTC Bremerton staff and beneficiaries to deal with.*

*Wildfires all across the Pacific Northwest, aided by strong winds, brought a level of pollution and sky-obscuring layered and lingering smoke, making the air quality index unhealthy and hazardous for many (Official Navy photo by Douglas H Stutz, NHB/NMRTC public affairs officer).*

## **Breathe a Sigh of Relief - Respiratory Recommendations from NHB**

*By Douglas H Stutz, NHB/NMRTC Bremerton public affairs officer – Breathing a sigh of relief really isn’t up in smoke.*

The current wildfire season is casting a smoky pale across much of the Puget Sound region, making the air quality unhealthy and potentially contributing to a host of associated health risks that mirror COVID-19 symptoms.

Many Pacific Northwest residents - like the rest of the country - have had respiratory and cardiovascular system ailments due to the ongoing pandemic outbreak for much of the year. There have been 77,545 cases and 1,953 fatalities as of Sept. 4, 2020, in Washington State alone due to COVID-19, with 1,064 cases and 10 deaths in Kitsap County.

As Naval Hospital Bremerton staff continue efforts to help stop the spread of COVID-19,

there is awareness that prevailing winds have pushed wildfire smoke over populated areas which can cause coughing, wheezing, and difficulty breathing, along with aggravating other normal functions.



*Blowing no smoke...Respiratory therapists like Hospital Corpsman 1st Class (Fleet Marine Force qualified) Omar Garcia-Argueta, assigned to NHB/NMRTC Bremerton Internal Medicine & Specialty Clinics continue to provide a variety of services to treat, evaluate and educate patients, everything from the 'ABCs' of Asthma, bronchitis and COPD (chronic obstructive pulmonary disease) to helping stop the spread of COVID-19. Respiratory therapy services have been in demand during the pandemic outbreak due to their ventilator expertise, including deploying on the hospital ship USNS Mercy (T-AH 19) to provide crucial assistance for those in need. Some of the services and support offered at Naval Hospital Bremerton include pulmonology function testing such as basic spirometry, lung diffusion and volumes Methacholine Challenge testing (test to rule out Asthma) and unattended sleep studies, along with coordinating breathing therapy with Continuous Positive Airway Pressure (CPAP), a common treatment for obstructive sleep apnea (official Navy photo by Douglas H Stutz, NHB/NMRTC Bremerton public affairs officer).*

“Staff and patients should do their best to avoid prolonged exposure to the smoke due to the fact that it can irritate the eyes, nose, throat and lungs,” said Hospital Corpsman 1st Class (Fleet Marine Force qualified) Omar Garcia-Argueta, respiratory therapist assigned to Internal Medicine & Specialty Clinics. State and country health advisory alerts on diminished air quality have been posted and shared to alert local populations, with NHB also taking a lead to assess those in need.

“The smoke can exasperate any existing underlying condition,” said Cmdr. Robert Uniszkiewicz, NHB/NMRTC Bremerton COVID-19 czar and public health emergency officer, acknowledging that there are similarities between COVID-19 and wildfire smoke. Both can wreak havoc on a person’s respiratory and immune systems.

The Washington State Emergency Management Division indicate those sensitive to wildfire smoke exposure include people with heart and lung disease, existing respiratory infection(s), diabetes, stroke survivor(s), infants, children, pregnant women, and people over 65 years of age.

If that list sounds the same as those most at risk from COVID-19, it’s because it is.

“Patients and staff who will most likely be impacted the most are those who have been diagnosed with cardio-respiratory diseases such as asthma, COPD (chronic obstructive pulmonary disease), pulmonary fibrosis or heart disease,” said Garcia-Argueta. “Asthma and COPD patients, in particular, should ensure that they are taking their maintenance medications as prescribed by their providers. Smoke may also impact pregnant women, the elderly population, and children. These patients and staff members should consult with their healthcare providers regarding specific precautions. According to the American Thoracic Society, inhaling smoke can cause inflammation of the airways and can make one more vulnerable to lung infections, such as COVID-19.”

“We realize that not everything is COVID-19 related, such as someone dealing with allergies, hay fever and the flu. But there are definitely those who are more vulnerable than others,” Uniszkiewicz added.

One effective strategy employed at NHB to ensure patients’ health care needs continue to be met during the pandemic is the Drive-Through Screening and Triage process, which follows Centers for Disease Control



and Prevention (CDC) criteria.

Everyone—staff, patient, or visitor—who arrives on base goes through the same procedure. This is a best practice across the military health system and in the civilian network. The drive-through is a safe and efficient way to effectively assess patients on their current health and wellness.

Is it COVID-19 or wildfire smoke?

Some of what the COVID-19 screening process determines is if a person in the previous 24 hours has had such symptoms as fever, cough (not allergy related), sore throat, shortness of breath/difficulty breathing, and/or loss of smell or taste.

Wildfire smoke is capable of producing harmful health effects from minor symptoms such as eye, nose, and throat irritation or headaches, to more severe conditions like shortness of breath, dry cough, throat soreness, chest tightness, asthma attacks, and worsening existing chronic conditions.

NHB advocates that anyone experiencing these symptoms should seek medical attention. They should also continue to follow CDC guidelines for stopping the spread of COVID-19, such as, staying at least a fathom - 6 feet or 2 arms' length - from others; Washing hands often and disinfecting frequently touched surfaces at home; Avoiding touch your eyes, nose or mouth; and Covering coughs and sneezes with your elbow or tissue.

Garcia-Argueta attests that the best recourse for avoiding wildfire smoke is to stay indoors.

“In order to prevent prolonged exposure to the wildfire smoke, one should plan to stay indoors and have both their windows and doors closed. Patients and staff members should also avoid engaging in strenuous physical activity outside and should refrain from smoking,” Garcia-Argueta said.



*Not quite the fog of war or London pea-soup variety, but the smothering smoke from the wildfires did limit—as well as obscure—outside activity and impact the Puget Sound region already dealing with the ongoing need to help stop the spread of COVID-19.*

If there's a need to head out into the great outdoors, a face mask should be worn if around others.

“Our recommendation is to still wear cloth face coverings. There are going to be those who think the smoke is causing them to have trouble breathing with the air quality like it is, but they're more susceptible to particles in the air due to being exposed to wildfire smoke,” explained Uniszkiewicz.

Garcia-Argueta also advocates American Thoracic Society basic steps for everyone to follow to stay safe, avoid smoke exposure and protect their lungs: stay indoors as much as possible; reduce strenuous activity; reduce other sources of indoor air pollution like vacuuming and frying meat; use central air conditioners or heater to filter the air; when traveling in a vehicle, keep the windows closed, run the air conditioner and set air to recirculate to reduce smoke.

Hot, dry conditions are in the forecast. Fire danger is high. The pandemic outbreak is also projected to keep lingering. Serious health effects are expected for some.

To breathe a sigh of relief, patients and staff should continue to heed the advice from NHB to help them clear the air around them.

## **‘I am Navy Medicine’ Hospitalman Kevin Stout, NMRTC Bremerton**

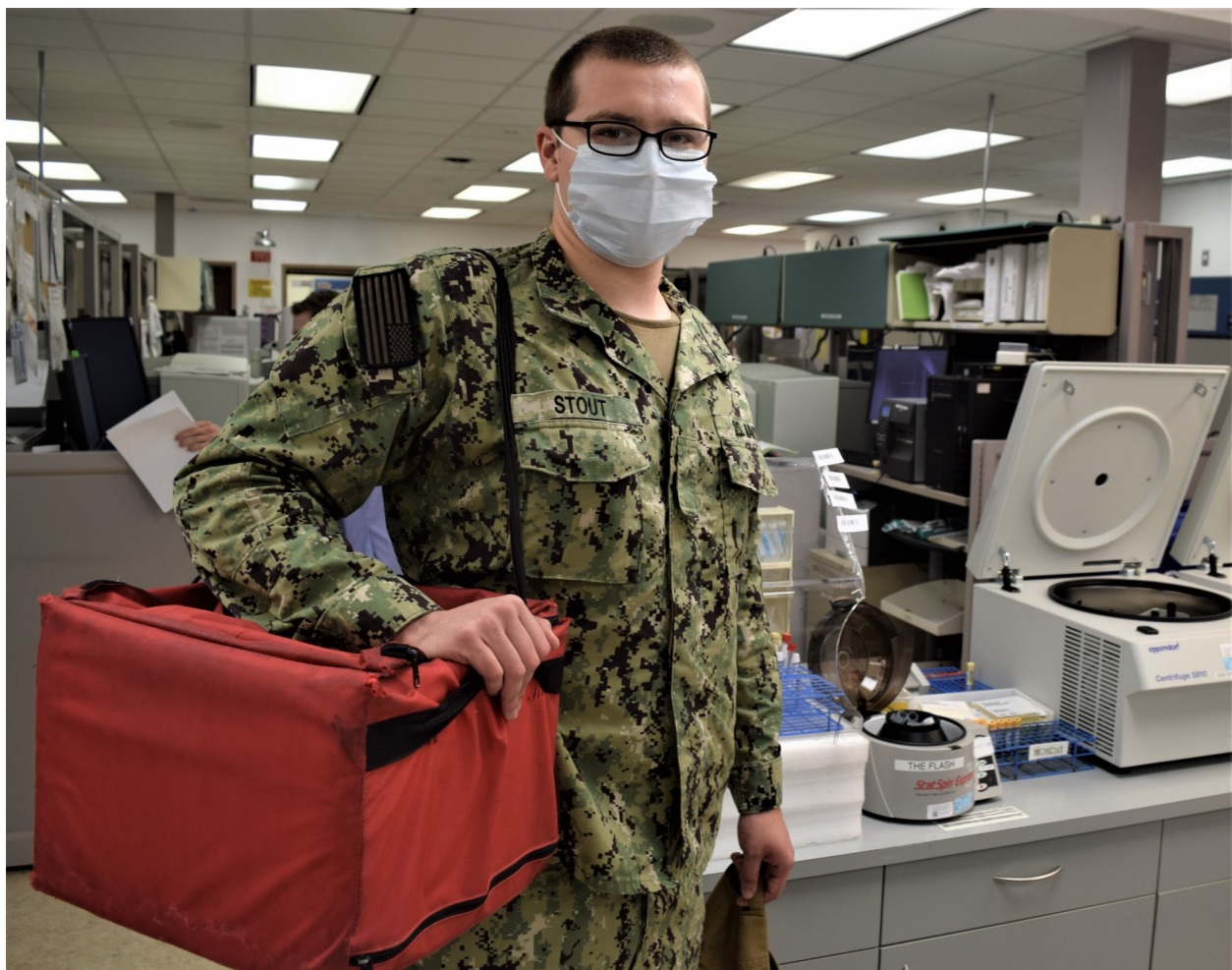
*As related to Douglas H Stutz, NHB/NMRTC Bremerton public affairs officer – “I am Hospitalman Kevin Stout, assigned to Navy Medicine Readiness and Training Command Bremerton Detachment Puget Sound Naval Shipyard (PSNS).”*

Stout, a Redding, Calif. native attended Pioneer Continuation school, and is currently handling such duties as providing acute care, working as a laboratory technician and helping with the clinic’s Occupational Health program, the largest of its kind in the Department of the Navy, serving approximately 15,000 Department of Defense (DoD) shipyard workers.

He also took part in the recent Bureau of Medicine and Surgery (BUMED) Radiation Health audit that resulted in zero discrepancies for the third year in a row, considered a remarkable achievement due to being the largest radiation health program in DoD.

The ‘Rad Health’ program is cited as the ‘gold standard’ by Naval Sea Systems Command and BUMED audits.

Stout is emblematic of why the program is so highly regarded and a standard of excellence. He was recognized by the shipyard’s leadership for performing flawlessly under pressure, conduct-



ing a contaminated person drill as part of the overall Radiation Health audit.

“I was [providing] corpsman coverage during the Contaminated Injured Person Assessment. It was my job to ensure overall safety and medical stability of the casualty,” said Stout. “The drill was a simulation of a radiation contaminated injury. I responded to a contaminated laceration on the hand. Medical takes priority in these kinds of situations. I quickly assessed the patient and got the bleeding under control. At that point, the very capable Radiation Health team and I started the decontamination process by cleaning the injury to ensure all contaminants were off or out of the patient.”

The PSNS Radiation Health Division was very impressed by Stout’s emergency medical response in the simulated drill scenario, as well as his demonstration of the strong working relationship between the clinic and the shipyard.

“With the excellent communication between the Rad Health team and I, we were able to show the worker our care for his well-being and get him the help he needs efficiently. I think working as a team shows every worker in the shipyard they’re safe at their job and will receive the highest quality of care,” explained Stout, adding that in his approximately four years in the Navy he has the necessary qualifications to handle such scenarios.

Even so, every situation can present a different set of unexpected trials.

“I have trained a good amount for these kinds of situations. The drill can get complicated if we are not communicating with each other or if we spread the contamination,” continued Stout, “With the added restrictions in place due to COVID-19, I would say the most challenging was being able to see out of my glasses while I was wearing a mask and face shield.”

Stout attests that it was gratifying to handle his responsibilities in the drill relying on his acquired knowledge, and knowing that the training he’s done has paid off by being able to address and assess any injured personnel.

“The most important elements demonstrated and shared during such a drill were clinical expertise, composure and professionalism,” Stout remarked.

Stout received the Demonstrated Quality Award by Puget Sound Naval Shipyard Radiation Health Division, ‘as the responding provider to a simulated contaminated injured worker drill during the annual Navy Medicine audit of the shipyard’s Radiation Health Program. HN Stout demonstrated clinical expertise, composure and professionalism. His actions were evaluated as excellent and are indicative of the exemplary partnership enjoyed by the detachment and Radiation Health Division.’

As has been the case for the past six-plus months, Stout has also been directly involved in helping to mitigate the spread of COVID-19.

“My fellow corpsmen and I have screened every single person as they walk through the clinic entrance and take part in cleaning the entire building multiple times a day. I’ve been assigned to our Employee Medicine clinic during this time. Any civilian that comes in for work-related injuries is screened to see if they need light duty or can return to work. My job is to ensure that our shipyard workers are getting the best treatment to continue performing their jobs on the various projects going on in the shipyard,” said Stout, who performs a variety of duties such as



pharmacy technician, hazardous waste manager and phlebotomist.

Stout became interested in a Navy Medicine career for job security.

“We always need medical care and law enforcement. I’ve always been interested in the medical field and this was a good opportunity,” related Stout, who has also been stationed at San Antonio, Texas, Portsmouth, Va. and Camp Pendleton, Calif.

When asked to sum up his experience with the Navy in one sentence, Stout replied, “Adapting to change like no other.”

### **‘I am Navy Medicine’ – helping another in need - Hospitalman Grace Pridmore**

*By Douglas H Stutz, NHB/NMRTC Bremerton public affairs officer* – It takes more than just awareness to respond to someone showing signs of distress.

It takes conviction of care, compassion and competence to help that someone in need.

Which describes precisely what Hospitalman Grace Pridmore did.

Pridmore, assigned to Navy Medicine Readiness and Training Command (NMRTC) Bremerton Detachment Puget Sound Naval Shipyard (PSNS), was acknowledged for her selfless effort by Capt. Shannon J. Johnson, NMRTC Bremerton commanding officer, for identifying another Sailor at risk and taking quick action to help get the Sailor to the appropriate level of care, very possibly saving a life.

“I knew my friend had been going through a lot since she arrived to her command and sadly her condition got worse as time went on” said Pridmore, of Kellyville, Okla. and 2019 graduate from Kellyville High school.

“I saw her well-being starting to quickly depreciate. Seeing this problem rapidly spiral out of control I knew I had to be there for her as much as I possibly could,” explained Pridmore. “She fully explained everything she was going through, and I took quick action to get her to someone with the appropriate level of training to help her. I knew from my training that this was the right decision. I contacted my chain of command for additional guidance to ensure we were complying with the COVID-19 guidelines.”

Pridmore declares her chain of command went above and beyond – just as she did - to help out the Sailor in need.

“I stayed with her until she got transferred to higher care. I continued to talk and visit with her as she was receiving this care so she wouldn’t be alone. With the resources and training my chain of command provided me I knew I could be the friend to help her. I will always stick by her side no matter how hard times get,” stated Pridmore.

During the ongoing effort to help stop the spread of COVID-19, Pridmore has also provided daily support against the pandemic outbreak from directing traffic to assuring personal protection equipment is worn in order to ensure worker and patient health is maintained.

“At the clinic we continue to see patients during this time. I ensure that our employees, active duty and civilian, remain healthy to go to work. Without them the shipyard could not operate



properly, so their health is extremely important,” said Pridmore.

Although Pridmore has only been part of Navy Medicine for approximately one year, her interest in the career field has long been an aspiration. During high school, she even attended vocational school Central Technology Center for additional nursing and medical education and training.

“I have been interested in the medical field since as long as I can remember. I have been actively chasing this goal since I was a junior in high school, getting my certified nursing assistant, certified medical assistant, and phlebotomy licenses before I graduated high school. I’d seen other students in my school make the decision to join the Navy. I started researching everything the Navy had to offer. I didn’t have any money for college, and I didn’t want to be in debt so this just made sense to me. I could become a corpsman, and do what I love then eventually get a degree,” related Pridmore, convinced that the Navy was for her.

“The Navy to me seemed like the best route for medical in comparison to the other branches,” continued Pridmore. “I also see it as a stepping stone to my bigger goals of the future, like becoming a registered nurse. Being in the military was a way for me not to do the traditional thing and go straight to college after high school, but I get the opportunity to travel and learn about life.”

Pridmore attests her personal story is simple, growing up in a ‘very small town’ in Oklahoma with her mom and sister, proving herself in school and employed by age 16 as a waitress until entering the Navy.

“I have always put my full effort into everything I do, that’s how I was raised. I’ve been blessed enough to be surrounded by people that love and support me and made me into the person I am today. They taught me good moral values that I always keep in mind,” said Pridmore, adding that Navy Medicine has shown what it takes to be in her chosen field.

“I have gained leadership skills and learned how to push myself. You can’t get this kind of experience anywhere else,” Pridmore said. “I find it very gratifying that I can make people feel safe in their workplace and the satisfaction of helping others to feel safe in their occupation.”

When asked to sum up her experience with Navy Medicine in one sentence, Pridmore replied, “Life’s not about how hard of a hit you can give, it’s about how many you can take and keep moving forward.”

## **I Am Navy Medicine: Christina Longbons, Staff Nurse at NHB**

*As related to Douglas H Stutz, NHB/NMRTC Bremerton public affairs officer – “I am Christina Longbons, affiliated with Navy Medicine for 20 years and a Labor and Delivery staff nurse at Naval Hospital Bremerton.”*

Longbons, a 1995 Peru High School graduate from Peru, New York and Georgia Baptist College of Nursing 2000 alumnus, with a Bachelor of Science in Nursing, and Certified Registered Nurse and International Board Certified Lactation Consultant (IBCLC) credentials, has long considered herself a self-professed ‘vocal advocate’ for the Newborn Care Clinic (NBCC) for years.

Her care, compassion and competence regarding the clinic led to her recently receiving the command’s ‘Good Catch Award,’ given to those who at times are faced with a problem and/or detect an issue and solve it by the best of their ability.



For Longbons, it was a combination of her professional knowledge and personal background mixed with her avowed passion for nursing and helping others that empowered her acknowledged act.

“I feel it is imperative in the support and care of our patient population to help them become families. In serving our country our beneficiaries are often moved away, frequently far away, from their support systems,” said Longbons. “Our Newborn Care Clinic not only



ensures a safe transition for our newborn from discharge until two weeks of age, but also serves as a resource for our new parents supporting them through one of life's exciting and sometimes challenging experiences."

Longbons knows from her own experience that for some, the most challenging part of becoming a new family is feeding their baby.

"This is where I excel and what I am most passionate about," Longbons stated. "I delivered my first baby in Spain, an ocean away from my family support. He was born pre-term and delivered by cesarean section. The next three weeks were the most challenging of my life. My son had a lot of difficulty feeding and lost a significant amount of weight."

"I was beside myself because I didn't know how to 'feed my baby,'" continued Longbons. "Should be simple, right? Wrong."

Her goal at that time was to exclusively breastfeed. But every feed was a struggle. Her baby kept losing weight. Her husband was supportive but not truly what or who she needed.

"I needed a feeding expert and I needed them to be easily accessible because I was exhausted," exclaimed Longbons, adding that in supporting the NBCC her goal has been to be that exact person for her patients and families that she needed during that very stressful, emotional time of caring for her son in Spain.

"That meant becoming the 'feeding expert' that I wish I had. I pursued my lactation certification and sought every opportunity to gain as much experience with breastfeeding as I could and increase my competence," Longbons said.

Because of her expanded knowledge as an IBCLC, she discovered a medical condition with a newborn which was preventing adequate feeding needs.

"I was able to recognize a suction problem in a newborn that I was caring for in the NBCC during an evaluation of the infant at the breast. That led to an evaluation of the baby's mouth and a discovery of the cleft palate," Longbons explained. "At that point the baby had been seen on numerous occasions before for weight loss concerns as well as dehydration. Once the cleft palate was recognized I was able to teach the family how to best feed their baby to support growth and weight gain as well as initiate appropriate follow-up support and an appropriate care plan."

Since her commissioning in the Navy Nurse Corps May, 2000, Longbons has worked as a staff nurse in Labor and Delivery her whole career.

"[I'm] On the front lines taking care of our soldiers, sailors and their families," said Longbons, adding that the best part about her career has been "helping mommies feed their babies and new parents become families."

Longbons comes from a military family. Both parents served in the U.S. Air Force and her



formative years were spent relocating from base to base. She followed her mother's footsteps for higher education in nursing and during college was awarded a scholarship through the Nurse Candidate program. So began her naval career. After graduation, commissioning and attending the requisite new officer training, she was off to her first duty station at National Navy Medical Center (NNMC) Bethesda, assigned to the Labor and Delivery unit.

"I felt like it was going to be an exciting adventure where I would learn and grow as a professional nurse and travel the world. Added bonus was that I felt the Navy had better duty stations than other military branches," related Longbons.

She also met and married her husband at NNMC Bethesda. Three years later, they transferred to U.S. Naval Hospital Rota, Spain.

"The next three years were spent exploring Europe when I wasn't at work. I also had both my kids abroad. My son was born in Spain in 2003 and two years later my daughter was born in Landstuhl, Germany. After that tour I separated from the Navy while my husband remained on active duty," Longbons said.

They took orders in 2009 for the final time to the Pacific Northwest and Longbons went back to work at NHB, continuing to work as a bedside nurse and in 2017, she completed her certification as well as became an IBCLC.

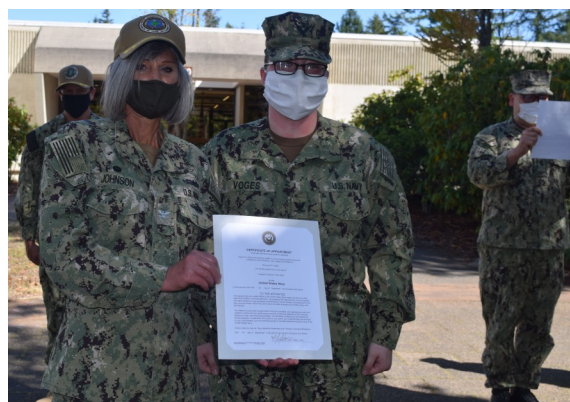
When asked what her time in Navy Medicine has meant to her, Longbons replied, "Navy Medicine has taken me from novice to expert over a 20 year career with the opportunity to care for our service members and their families. I have to opportunity to be involved in what, for most people, is one of the most important experiences of their lives. To have that opportunity is incredibly rewarding.

## **Congratulations to our MAP Sailors!**

The Meritorious Advancement Program authorizes Commanding Officers to advance a small percentage of eligible enlisted Sailors in paygrades E5 and below to the next higher paygrade. This gives Commanding Officers the opportunity to acknowledge a select few who have demonstrated that they are ready for the next level of responsibility by advancing them in rate.

Sailors who are meritoriously advanced to first class, second class, or third class petty officer in the United States Navy, become heir to a long and proud tradition of naval leadership.

By accepting the appointment, they are charged with demonstrating the highest standards of performance, moral courage and dedication to the Navy and the nation. They must commit to serving as an example for



their fellow Sailors to follow. Their desire to excel and to guide others must be boundless; their appearance must be a model for others and their performance must be a continual reflection of their sincerity, attention to duty and moral responsibility.

We take great pride in announcing the following have been advanced to the next highest paygrade;

***Hospital Corpsman 1st Class Benjamin Kaplan,***

***Hospital Corpsman 2nd Class Cody Moorhead, HM2 Amber Shaffer, HM2 Abhiram Nair, HM2 Mai Hornback, and HM2 Israel Ventura.***

***Hospital Corpsman 3rd Class Giovanni Knowles, HM3 Savannah Voges, HM3 Mervin Cuevas, HM3 Robert Balatbat, HM3 Clifford Clinton, and Logistics Specialist 3rd Class Stephanie Cardenas.***









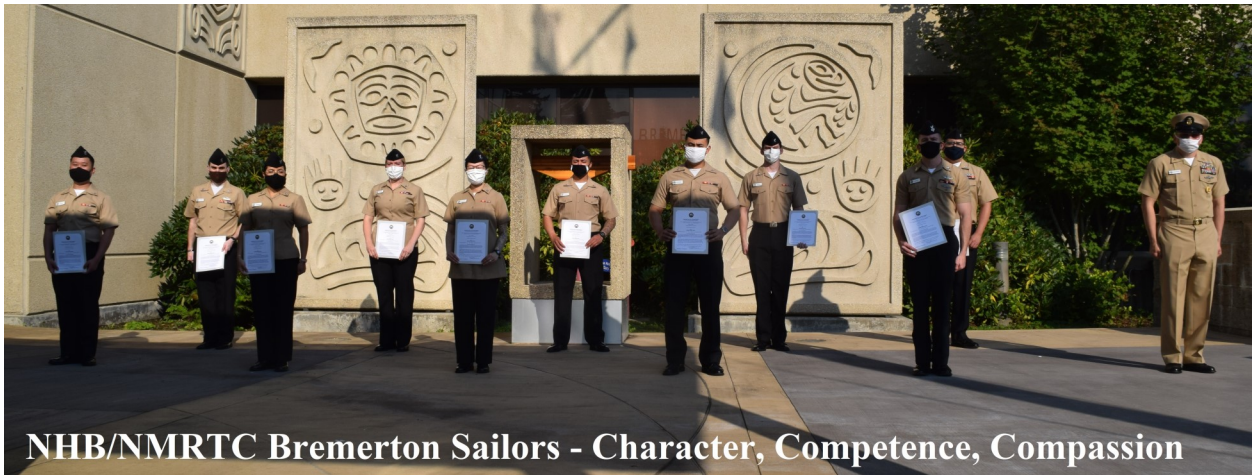
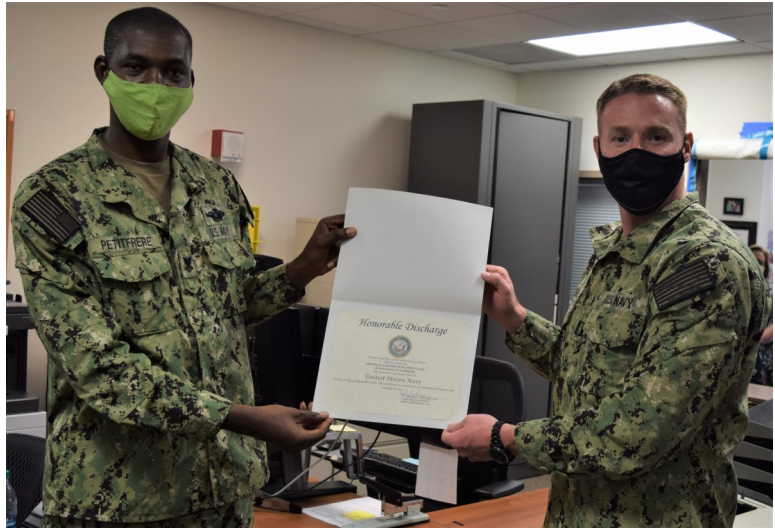








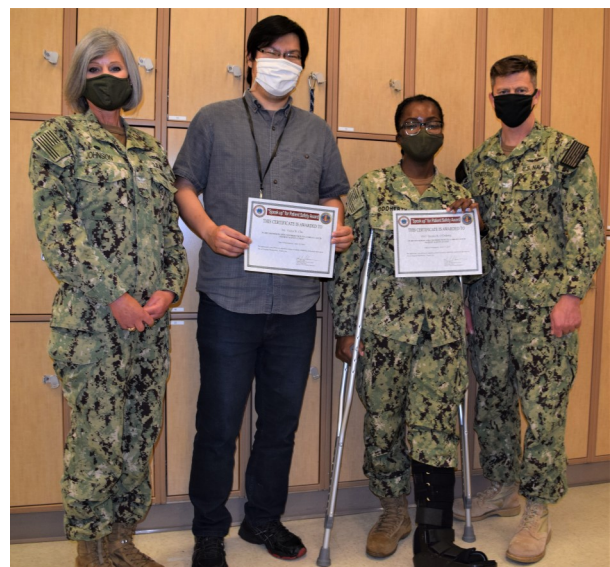
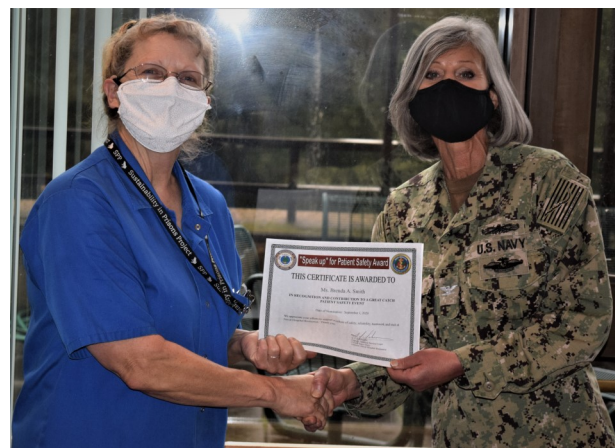
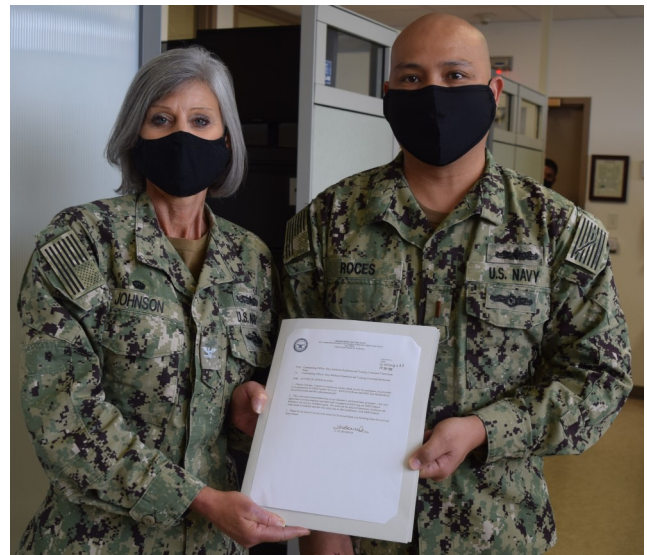
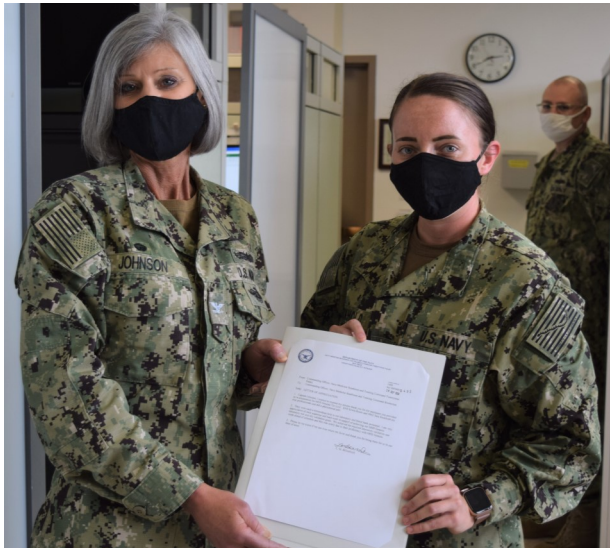
## ***NHB/NMRTC Bremerton Staff Scenes to be seen...***



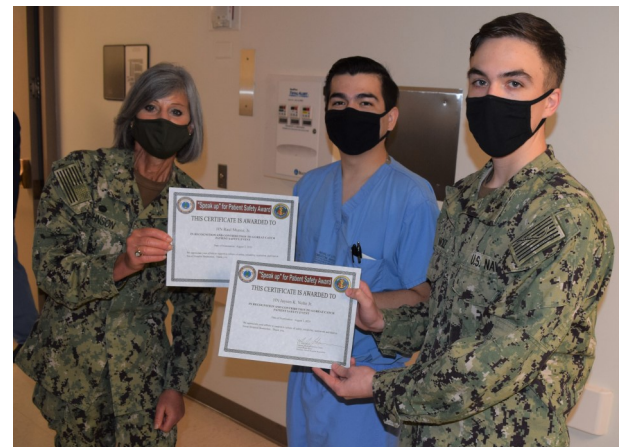
**NHB/NMRTC Bremerton Sailors - Character, Competence, Compassion**



## Command Shout-Outs for Patient-Safety, Good Catch, LOAs







**Patient-Safety,  
Good Catch,  
Recognition,  
End of Tour**



## I Am Navy Medicine – and Blue Jacket of the Quarter – HN Paighton Scott

As related to Douglas H Stutz, NHB/NMRTC Bremerton public affairs officer – It didn't take long for Hospitalman Paighton Scott to make a noticeable difference.

Scott, a Clovis, Calif. native and Clovis East High School class of 2018 graduate, was recently selected amongst her peers as Navy Medical Readiness and Training Command (NMRTC) Bremerton's Blue Jacket of the Quarter.

The award is presented to enlisted personnel – such as Scott, assigned to NMRTC Bremerton's Navy Medicine Readiness Training Unit (NMRTU) Everett - who stand out from others in similar paygrades due to dedication to their responsibilities and professionalism. Scott was cited as an example of the Navy core values of honor, courage and commitment, along with the command's standards of care, competence and compassion.

"I was incredibly proud of myself, I felt as if all of my hard work had paid off and I was just really excited to represent NMRTU Everett and make my command proud," said Scott, who has served as a Navy hospital corpsman for approximately 18 months.

"Receiving this award really makes me feel like I made the right decision with my career," added Scott, who primarily works as an immunization technician. "I have always loved medical, but finding out that I'm good at it and I am excelling in it is insanely reassuring and exciting."

Scott's Navy Medicine career actually began well before her active duty status, even before graduating from Clovis East.

"A month after I turned 17, as a senior in high school, I went to the recruiting office and a week later I was sworn in," related Scott. "I have always wanted to work in the medical field so choosing my rate wasn't hard at all."

Her interest in a career with Navy Medicine was prompted by both financial considerations as well as



*A stickler for competence...Primarily handling duties as an immunization technician, Hospitalman Paighton Scott, a Clovis, Calif. native attached to NMRTC Bremerton's NMRTU Everett, was recently selected amongst her peers as Blue Jacket of the Quarter, due to dedication to her responsibilities and professionalism. Scott was also cited as an example of the Navy core values of honor, courage and commitment, along with the command's standards of care, competence and compassion (Official Navy photo courtesy of NMRTU Everett).*

the decision to enter a service branch with a good track record in supporting advancement goals of those seeking to further their aspirations.

“I couldn’t afford college. Navy Medicine presented a lot of opportunities other than just college. I have acquired a tremendous amount of knowledge that I know will help me excel in a career in the medical field,” Scott said. “It is an absolute honor to know that my hard work contributes to the mission and has so much meaning. Even when it feels like something small, it is vital.”

Scott knew growing up that supporting those in need was a possible career choice.

“I have always loved caring for people, especially children. I was a nanny before joining the Navy. I wasn’t sure if I wanted to be a teacher or a medical professional until a very close family member was admitted into the ICU – intensive care unit - and kept inpatient for almost two weeks when I was 16. Watching how caring and attentive they were in saving her life kind of resolved any uncertainty that I had,” noted Scott. Already in her brief time, Scott readily affirms that Navy Medicine has provided a greater sense of responsibility for her.

“Knowing that people choose to come to me and count on me to help them or get a job done really makes me feel like I’m exactly where I’m meant to be,” said Scott, and her workload at NMRTU Everett would seemingly confirm that.

Along with immunizations technician, Scott is a Family Medicine corpsman, a Periodic Health Assessment (PHA) record reviewer, a Central Sterilization Room secondary technician, a Sexual Assault Prevention Response victim advocate and a Healthcare Effectiveness Data and Information Set (HEDIS) secondary user. She also handles collateral duties as a member of the command’s Diversity Committee, and serves as Junior Enlisted Association public affairs officer.

All Scott’s duties adhere to the priority of operational readiness set by the Navy Surgeon General, which includes producing force medical readiness and medical force readiness.

“As a corpsman in the Medical Readiness department, tracking immunizations, PHA’s and HEDIS measures ensures that all patients are completely up to date on all exams. Tracking individual medical readiness and notifying patients or commands when they or their sailors are due for immunizations, PHA, lab, etc. directly contributes to keeping operational readiness above 90 percent. The Immunization department’s main responsibility is medical readiness. Without proper administration and documentation of vaccines, dependents are unable to attend school and service members are unable to deploy,” said Scott.

For much of 2020, Scott has also done her share and more to help stop the spread of COVID-19.

“Working at the clinic Entry Control Point I screen patients for possible COVID-19 symptoms, coordinate with all clinic departments to ensure that patients do not overflow in waiting rooms and that patients are complying with mandated face covering and social distancing guidelines,” explained Scott. “This guarantees that all patients and staff members are kept safe and healthy within the premises.”

When asked to sum up her experience here with Navy Medicine in one sentence, Scott replied, “My experience has been educational, empowering and trying at times. But I am so thankful for all of the opportunities I’ve been given and all of the help I have received from my command.”







## **Protect Yourself As You Continue to Protect Others...**

*NMRTC Bremerton continues to proactively require all staff to follow the current, and mandatory, Health Protection Guidance (HPCON) Bravo measures in place.*

*HPCON Bravo requires physical distance be maintained of at least six feet from others. Cloth face coverings are to be worn when in close contact with others for fifteen or more minutes and a distance of six feet can't be maintained.*

*Continue to practice strict hygiene guidelines, such as frequent hand washing for at least 20 seconds, no handshaking, fist bumps, or high fives, and limit get-togethers to no more than 10 with physical distancing in place.*

*Hand-sanitizing, as Hospital Corpsman 3rd Class Mae Larimer (above) attests, is yet another method to implement to help stop the spread of COVID-19.*